FORM D

notice and must be completed.

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL OMB Number: 3235-0076 Expires: November 30, 2001

SEC

2002

RECEIVED

Estimated average burden hours per response . . . 16.00

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY						
Prefix		Serial				
DAT	E RECEIV	ED				
	i					

Name of Offering (check if this is an amendment and no	•	licate change.)	
TurboGenomics, Inc. Convertible Notes w/ Warran Filing Under (Check box(es) that apply): ☐ Rule 504 ☐		☐ Section 4(6) ☐ ULO	
	Rule 303 🖻 Rule 306	☐ Section 4(6) ☐ ULO	E
Type of Filing: New Filing		T. 1	
1. Enter the information requested about the issuer	<u>DENTIFICATION DA</u>	<u>IA</u>	
Name of Issuer (check if this is an amendment and nam	has changed, and indic	ate change)	
TurboGenomics, Inc.	nas changed, and more	ate change.)	
	et, City, State, Zip Code	e) Telephone Number (Inclu 203-974-0470	ding Area Code)
Address of Principal Business Operations (Number and Str (if different from Executive Offices) Same as about		e) Telephone Number (Inclu Same as above.	ding Area Code)
Brief Description of Business Bioinformatics Application Service Provider			PROCESSE
Type of Business Organization ☑ corporation ☐ limited partnership	already formed	☐ other (please specify)	MAY 1 4 2002
☐ business trust ☐ limited partnership	to be formed	b other (prease speen)	THOMSON_
Actual or Estimated Date of Incorporation or Organization: Jurisdiction of Incorporation or Organization: (Enter two-le CN for Canac	er U.S. Postal Service a		ted DE
	RAL INSTRUCTIONS		
Who Must File: All issuers making an offering of securities in reli or 15 U.S.C. 77d(6).		er Regulation D or Section 4(6).	, 17 CFR 230.501 et seq.
When To File: A notice must be filed no later than 15 days after Securities and Exchange Commission (SEC) on the earlier of the address after the date on which it is due, on the date it was mailed by	date it is received by the	SEC at the address given belo	
Where To File: U.S. Securities and Exchange Commission, 450 Fi	-		
Copies Required: Five (5) copies of this notice must be filed with must be photocopies of the manually signed copy or bear typed or		st be manually signed. Any cop	pies not manually signed
Information Required: A new filing must contain all information changes thereto, the information requested in Part C, and any mate the Appendix need not be filed with the SEC.			
Filing Fee: There is no federal filing fee.			
State: This notice shall be used to indicate reliance on the Uniform Limited ULOE and that have adopted this form. Issuers relying on ULOE n are to be, or have been made. If a state requires the payment of a feet of the state requires the payment of the payment of the paymen	ist file a separate notice wi	ith the Securities Administrator	in each state where sales

will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this

ATTENTION Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice

			and had recons	energija pasangan
2. Enter the information requested for	A. BASIC IDENT	<u>IFICATION DATA</u>		
•	Č	Louishin she and Committee		
• Each promoter of the issuer, if the	_	-		
 Each beneficial owner having the securities of the issuer; 	e power to vote or dispose, o	or direct the vote or dispo	sition of, 10%	or more of a class of equity
 Each executive officer and directed 	or of corporate issuers and of	corporate general and ma	anaging partners	s of partnership issuers; and
 Each general and managing part 	tner of partnership issuers.			
Check Box(es) that Apply: ☐ Promo	ter Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individua	al)	-		
Gardiner, Gregory E.				
Business or Residence Address (Number	er and Street, City, State, Zij	p Code)		
c/o TurboGenomics, Inc., 265 Ch	hurch Street, New Haver	ı, CT 06510		
Check Box(es) that Apply: Promo	ter 🔲 Beneficial Owner	■ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individua	al) is a second	Parties and the sequence of property than the sequence of the		en Laurage de la Company de
Thalberg, Beverly E.	ic constant			
Business or Residence Address (Number 1985)				Thankin was magazi sa pala da pala
c/o TurboGenomics, Inc., 265 Ch				
Check Box(es) that Apply: ☐ Promo	oter	E Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individua	al)			
Sherman, Andrew H.				
Business or Residence Address (Number	• • • • • • • • • • • • • • • • • • • •	,		
c/o TurboGenomics, Inc., 265 Ch				
Check Box(es) that Apply: Promo	oter Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individua	al)	San Park		
Scientific Computing Associates	s, Inc.			
Business or Residence Address (Number C/o TurboGenomics, Inc., 265 Cl			Patherings of Sale.	
Check Box(es) that Apply: ☐ Promo	eter	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individua	al)			
Business or Residence Address (Number	er and Street, City, State, Zip	p Code)		
Check Box(es) that Apply: Promo	ter Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner

Business or Residence Address (Number and Street, City, State, Zip Code)

Business or Residence Address (Number and Street, City, State, Zip Code)

Full Name (Last name first, if individual)

Full Name (Last name first, if individual)

☐ Beneficial Owner ☐ Executive Officer

☐ General and/or Managing Partner

☐ Director

				B. INF	ORMAT	ION ABO	OUT OFF	ERING				il S	
1 Une th	e issuer so	ld or doe	s tha issue	r intend to	sall to no	n accredi	tad invast	ore in this	offering?			Yes	No ⊠
i. Has ui	ie issuei so	ola, or ace:			n Append				-	*************	••••••		
0 33/1-4								-				6.10	500
2. What	is the mini	mum inve	stment tha	t will be a	ccepted fr	om any in	aiviauai?.	•••••		•••••		\$_12,5 Yes	
3. Does t	he offering	g permit jo	oint owner	ship of a s	ingle unit	?						×	
	he informa												
	similar realisted is an												
	name of the												
	ler, you ma								•				
Full Name	(Last name	first, if in	dividual)										
Business or	Residence	Address	(Number a	and Street,	City, Stat	e, Zip Coo	de)	3					
Name of As	ssociated E	Broker or I	Dealer										
States in W	hich Perso	n Listed H	las Solicité	ed or Inter	nde to Soli	cit Purcha	cerc					· · · · · -	
	All States"											☐ All	States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MC)]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA	.]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR	.]
Full Name	(Last name	e first, if in	dividual)										
Business or	Residence	Address	(Number a	ınd Street,	City, Stat	e, Zip Coo	de)						
Name of As	ssociated E	Broker or I	Dealer										
States in W	hich Perso	n Listed H	Ias Solicite	ed or Inter	nds to Soli	cit Purcha	sers					<u> </u>	
	All States"	or check		States)									
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID	
[IL] 	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MC	
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA	
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR	.]
Full Name	(Last name	e first, if in	dividual)										
Business or	Residence	Address	(Number a	ınd Street,	City, Stat	e, Zip Coo	de)						
Name of As	sociated P	Broker or I	Dealer										
	ssociated 2	TORUL OF E											
States in W (Check "A	hich Perso All States"										•••••	□ Ali	States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID	
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MC	
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA	.]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$ 0	\$ 0
	Equity	\$0	\$.0
	□ Common □ Preferred		4
		\$ 3,000,000	\$ 1,755,000
	Partnership Interests	\$ 0	\$ 0
	Other (Specify)	\$ O	\$ O
			\$ 1,755,000
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	39	\$ 1,755,000
	Non-accredited Investors	0	\$ 0
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.	Type of	Dollar Amount
	Type of offering	Security	Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		l \$ 0
	Printing and Engraving Costs		\$ 0
	Legal Fees	x	\$ 11,000
	Accounting Fees		\$ 0
	Engineering Fees		l \$ 0
	Sales Commissions (specify finders' fees separately)		l \$ 0
	Other Expenses (identify) Blue Sky filing fees		
	Total		

	b. Enter the difference between the aggregate offering price given in response to Part C –Q tion 1 and total expenses furnished in response to Part C - Question 4.a. This difference is	ues- the	
5.	"adjusted gross proceeds to the issuer." Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed be8used for each of the purposes shown. If the amount for any purpose is not known, furn an estimate and check the box to the left of the estimate. The total of the payments listed nequal the adjusted gross proceeds to the issuer set forth in response to Part C - Question	d to nish nust	\$ 2.986.700
	above.	Payments to Officers, Directors, & Affiliates	Payments To Others
	Salaries and fees	□\$ <u>0</u>	□ \$ <u>0</u>
	Purchase of real estate	□\$ <u>0</u>	□ \$ <u>0</u>
	Purchase, rental or leasing and iunstallation of machinery and equipment	□\$ <u>0</u>	□\$ <u>0</u>
	Construction or leasing of plant buildings and facitlities	□\$ <u>0</u>	□\$ <u>0</u>
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	□\$ <u>0</u>	□\$ <u>0</u>
	Repayment of indebtedness	□\$ <u>0</u>	□\$ <u>0</u>
	Working capital	□\$ <u>0</u>	≥ \$ <u>2,986,700</u>
	Other (specify):	□\$ <u>0</u>	□\$ <u>0</u>
		□\$ <u>0</u>	□\$ <u>0</u>
	Column Totals	□\$ <u>0</u>	≥ \$ <u>2,986,700</u>
	Total Payments Listed (column totals added)	E \$ <u>2</u>	,986,700
117	D. FEDERAL SIGNATURE	n N	
follo	e issuer has duly caused this notice to be signed by the undersigned duly authorized person. I owing signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and is st of its staff, the information furnished by the issuer to any non-accredited investor pursuar	Exchange Commissi	on, upon written re-
Issu	uer (Print or Type) Signature	Date	
Т	urboGenomics, Inc. Devery C Signature Signature Levery C Signer (Print or Type) Title of Signer (Print or Type)	April	a2002
	ne of Signer (Print or Type) Title of Signer (Print or Type)	17.101111	<u>-1 '</u>
B	Beverly E. Thalberg Chairman		

-ATTENTION-

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

1.	of such rule?	ntly subject to any of the disqualification provisions		Yes	No ⊠
	See App	endix, Column 5, for state response.			
2.	The undersigned issuer hereby undertakes to furn Form D (17 CFR 239.500) at such times as requ	nish to any state administrator of any state in which this ired by state law.	s notice is filed.	a noti	ce on
3.	The undersigned issuer hereby undertakes to furrissuer to offerees.	nish to the state administrators, upon written request, in	formation furn	ished t	by the
4.	•	is familiar with the conditions that must be satisfied to in which this notice is filed and understands that the isse that these conditions have been satisfied.			
	issuer has read this notification and knows the coersigned duly authorized person.	ntents to be true and has duly caused this notice to be	signed on its be	ehalf b	y the
Issu	er (Print or Type)	Signature	Date		
_Tu	urboGenomics, Inc.		April . 200	2	

Title (Print or Type)

Chairman

E. STATE SIGNATURE

instruction:

Name (Print or Type)

Beverly E. Thalberg

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1		2	3	4 5 Disqualification						
	to non-a investor	I to sell ccredited s in State I-Item1)	Type of security and aggregate offering price offered in State (Part C-Item1)		Type of investor and Amount purchased in State (Part C-Item 2)					
State	Yes	No	Convertible Notes w/ Warrants	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
AL										
AK										
AZ										
AR										
CA		X	\$3,000,000	7	\$200,000	-0-	-0-		X	
со										
CT		X	\$3,000,000	5	\$117,500	-0-	-0-		X	
DE										
DC										
FL		X	\$3,000,000	1	\$25,000	-0-	-0-		X	
GA										
HI										
ID										
IL		X	\$3,000,000	2	\$75,000	-0-	-0-		X	
IN		X	\$3,000,000	1	\$75,000	-0-	-0-		X	
IA		X	\$3,000,000	1	\$25,000	-0-	-0-		X	
KS										
KY										
LA										
ME										
MD										
MA		X	\$3,000,000	2	\$75,000	-0-	-0-		X	
MI		X	\$3,000,000	1	\$25,000	-0-	-0-		X	
MN										
MS										
MO										

A STATE OF THE STA	PPENINX	
DELLE GRADE AND		The state of the s

1		2	3 4 Disqua							
	to non-a investor	I to sell ccredited s in State I-Item1)	Type of security and aggregate offering price offered in State (Part C-Item1)		Type of investor and Amount purchased in State (Part C-Item 2)					
State	Yes	No	Convertible Notes w/ Warrants	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
MT										
NE										
NV										
NH		_								
NJ		X	\$3,000,000	4	\$125,000	-0-	-0-		X	
NM					_					
NY		X	\$3,000,000	9	\$337,500	-0-	-0-		X	
NC		ļ								
ND										
ОН										
OK										
OR										
PA		X	\$3,000,000	1	\$25,000	-0-	-0-		X	
RI					_					
SC		_			_					
SD										
TN										
TX										
UT										
VT										
VA		X	\$3,000,000	1	\$500,000	-0-	-0-		X	
WA		X	\$3,000,000	2	\$50,000	-0-	-0-		X	
WV										
WI		_								
WY							· · · · · · ·			
PR			<u> </u>		of 8					

. . . .